



ANNUAL STATEMENT

For the Year Ended December 31, 2013
of the Condition and Affairs of the

PATRONS OXFORD INSURANCE COMPANY

NAIC Group Code.....1275,NAIC Company Code..... 28290Employer's ID Number..... 01-0020315

Organized under the Laws of MaineState of Domicile or Port of Entry MaineCountry of Domicile US
Incorporated/Organized..... May 5, 1877Commenced Business..... May 5, 1877
Statutory Home Office24 Harriman Drive..... Auburn ME US 04211-1960

Main Administrative Office24 Harriman Drive Auburn ME US..... 04211-1960207-783-2258

Mail AddressPO Box 1960..... Auburn ME US 04211-1960

Primary Location of Books and Records24 Harriman Drive..... Auburn ME US 04211-1960207-783-2258

Internet Web Site Addresswww.patrons.com
Statutory Statement ContactSharon Leslie Buckley207-783-2258-222
sbuckley@patrons.com207-783-7507

OFFICERS

Name	Title	Name	Title
1. Mark Alan Pettingill	Chief Executive Officer	2. Kevin Michael Meskell	Secretary
3. Sharon Leslie Buckley	Treasurer	4.	

OTHER

Clifford Blair Biardi	V.P. Underwriting/Marketing	Leo Jean Simard	V.P. Claims
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DIRECTORS OR TRUSTEES

James Dudley Asher	Karl Douglas Briggs	Kevin Michael Meskell	Robert Evan Quinton
Mark Alan Pettingill	John Michael Sheskey	Walter Carl Smythe	Robert Peter Whitmore

State of..... Maine
County of..... Androscoggin

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Mark Alan Pettingill	Kevin Michael Meskell	Sharon Leslie Buckley
Chief Executive Officer	Secretary	Treasurer

Subscribed and sworn to before me
This _____ day of _____ 2014

a. Is this an original filing? Yes [X] No []
b. If no
1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	146,000		146,000	146,725
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			.0	
2.2 Common stocks.....			.0	
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			.0	
3.2 Other than first liens.....			.0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	706,967		706,967	760,149
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			.0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			.0	
5. Cash (\$.....2,451,510, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....0, Schedule DA).....	2,451,510		2,451,510	4,525,862
6. Contract loans (including \$.....0 premium notes).....			.0	
7. Derivatives (Schedule DB).....			.0	
8. Other invested assets (Schedule BA).....	200,000	200,000	.0	
9. Receivables for securities.....			.0	
10. Securities lending reinvested collateral assets (Schedule DL).....			.0	
11. Aggregate write-ins for invested assets.....	.0	.0	.0	.0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	3,504,476	200,000	3,304,476	5,432,736
13. Title plants less \$.....0 charged off (for Title insurers only).....			.0	
14. Investment income due and accrued.....			.0	.251
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	188,540	13,139	175,400	169,166
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	6,341,178	8,613	6,332,565	5,879,098
15.3 Accrued retrospective premiums.....			.0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	5,191,751		5,191,751	4,206,937
16.2 Funds held by or deposited with reinsured companies.....			.0	
16.3 Other amounts receivable under reinsurance contracts.....			.0	
17. Amounts receivable relating to uninsured plans.....			.0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			.0	
18.2 Net deferred tax asset.....	566,657	360,418	206,239	330,322
19. Guaranty funds receivable or on deposit.....			.0	
20. Electronic data processing equipment and software.....	88,705	79,027	9,677	27,494
21. Furniture and equipment, including health care delivery assets (\$.....0).....	8,685	8,685	.0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.0	
23. Receivables from parent, subsidiaries and affiliates.....			.0	
24. Health care (\$.....0) and other amounts receivable.....			.0	
25. Aggregate write-ins for other than invested assets.....	.0	.0	.0	.0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	15,889,992	669,883	15,220,109	16,046,004
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0	
28. TOTALS (Lines 26 and 27).....	15,889,992	669,883	15,220,109	16,046,004

DETAILS OF WRITE-INS

1101. ....			.0	
1102. ....			.0	
1103. ....			.0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.0	.0	.0	.0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	.0	.0	.0	.0
2501. Non-vested pension.....			.0	
2502. ....			.0	
2503. ....			.0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.0	.0	.0	.0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	.0	.0	.0	.0

PATRONS OXFORD INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6).....		1,427,769
3. Loss adjustment expenses (Part 2A, Line 35, Column 9).....		
4. Commissions payable, contingent commissions and other similar charges.....	1,444,651	2,317,975
5. Other expenses (excluding taxes, licenses and fees).....	987,886	893,652
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	147,282	124,372
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	150,277	1,007
7.2 Net deferred tax liability.....		
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$.....18,782,260 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....		
10. Advance premium.....	387,039	359,879
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	3,377,630	2,407,346
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19).....		
14. Amounts withheld or retained by company for account of others.....	1,524,233	1,480,982
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified) (Schedule F, Part 8).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....	132,426	5,339
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	8,151,424	9,018,321
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	8,151,424	9,018,321
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	2,500,000	2,500,000
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....	2,500,000	2,500,000
35. Unassigned funds (surplus).....	2,068,685	2,027,683
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39).....	7,068,685	7,027,683
38. TOTALS (Page 2, Line 28, Col. 3).....	15,220,109	16,046,004

DETAILS OF WRITE-INS

2501. Line 15 from 2000 Annual Statement.....		
2502. Unpaid investment expenses.....		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

PATRONS OXFORD INSURANCE COMPANY
STATEMENT OF INCOME

UNDERWRITING INCOME			1	2
			Current Year	Prior Year
1.	Premiums earned (Part 1, Line 35, Column 4).....			1,103,253
DEDUCTIONS				
2.	Losses incurred (Part 2, Line 35, Column 7).....			1,030,889
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	0		136,375
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	(0)		(44,742)
5.	Aggregate write-ins for underwriting deductions.....	0		0
6.	Total underwriting deductions (Lines 2 through 5).....	0		1,122,522
7.	Net income of protected cells.....			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....	(0)		(19,269)
INVESTMENT INCOME				
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17).....	(16,444)		777
10.	Net realized capital gains (losses) less capital gains tax of \$.....0 (Exhibit of Capital Gains (Losses)).....			
11.	Net investment gain (loss) (Lines 9 + 10).....	(16,444)		777
OTHER INCOME				
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....11,226).....	(11,226)		(28,035)
13.	Finance and service charges not included in premiums.....	297,762		302,631
14.	Aggregate write-ins for miscellaneous income.....	0		4,678
15.	Total other income (Lines 12 through 14).....	286,536		279,274
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	270,093		260,782
17.	Dividends to policyholders.....			
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	270,093		260,782
19.	Federal and foreign income taxes incurred.....	159,572		7,796
20.	Net income (Line 18 minus Line 19) (to Line 22).....	110,520		252,986
CAPITAL AND SURPLUS ACCOUNT				
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	7,027,683		6,809,552
22.	Net income (from Line 20).....	110,520		252,986
23.	Net transfers (to) from Protected Cell accounts.....			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....			
25.	Change in net unrealized foreign exchange capital gain (loss).....			
26.	Change in net deferred income tax.....	27,345		(26,316)
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....	(96,864)		(8,539)
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....			
29.	Change in surplus notes.....			
30.	Surplus (contributed to) withdrawn from protected cells.....			
31.	Cumulative effect of changes in accounting principles.....			
32.	Capital changes:			
32.1	Paid in.....			
32.2	Transferred from surplus (Stock Dividend).....			
32.3	Transferred to surplus.....			
33.	Surplus adjustments:			
33.1	Paid in.....			
33.2	Transferred to capital (Stock Dividend).....			
33.3.	Transferred from capital.....			
34.	Net remittances from or (to) Home Office.....			
35.	Dividends to stockholders.....			
36.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....			
37.	Aggregate write-ins for gains and losses in surplus.....	0		0
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37).....	41,001		218,131
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	7,068,685		7,027,683
DETAILS OF WRITE-INS				
0501.	.....		
0502.	.....		
0503.	.....		
0598.	Summary of remaining write-ins for Line 5 from overflow page.....	0		0
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0		0
1401.	Interest on funds held by reinsurer.....			4,678
1402.	Miscellaneous income.....			
1403.	Pension plan dividends.....			
1498.	Summary of remaining write-ins for Line 14 from overflow page.....	0		0
1499.	Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0		4,678
3701.	Lines 23 and 29 from 2000 Annual & Quarterly Statements.....			
3702.	.....		
3703.	.....		
3798.	Summary of remaining write-ins for Line 37 from overflow page.....	0		0
3799.	Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0		0

PATRONS OXFORD INSURANCE COMPANY
CASH FLOW

		1	2
		Current Year	Prior Year
CASH FROM OPERATIONS			
1.	Premiums collected net of reinsurance.....	543,698	(687,012)
2.	Net investment income.....	37,715	59,588
3.	Miscellaneous income.....	286,536	279,274
4.	Total (Lines 1 through 3).....	867,949	(348,150)
5.	Benefit and loss related payments.....	2,412,583	(1,167,916)
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7.	Commissions, expenses paid and aggregate write-ins for deductions.....	756,180	(731,408)
8.	Dividends paid to policyholders.....		
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	10,303	(94,578)
10.	Total (Lines 5 through 9).....	3,179,065	(1,993,902)
11.	Net cash from operations (Line 4 minus Line 10).....	(2,311,116)	1,645,752
CASH FROM INVESTMENTS			
12.	Proceeds from investments sold, matured or repaid:		
12.1	Bonds.....		
12.2	Stocks.....		
12.3	Mortgage loans.....		
12.4	Real estate.....		
12.5	Other invested assets.....		7,016
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7	Miscellaneous proceeds.....		
12.8	Total investment proceeds (Lines 12.1 to 12.7).....	0	7,016
13.	Cost of investments acquired (long-term only):		
13.1	Bonds.....		
13.2	Stocks.....		
13.3	Mortgage loans.....		
13.4	Real estate.....		
13.5	Other invested assets.....		200,000
13.6	Miscellaneous applications.....		
13.7	Total investments acquired (Lines 13.1 to 13.6).....	0	200,000
14.	Net increase (decrease) in contract loans and premium notes.....		
15.	Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	0	(192,984)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16.	Cash provided (applied):		
16.1	Surplus notes, capital notes.....		
16.2	Capital and paid in surplus, less treasury stock.....		
16.3	Borrowed funds.....		
16.4	Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5	Dividends to stockholders.....		
16.6	Other cash provided (applied).....	236,764	197,015
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	236,764	197,015
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(2,074,352)	1,649,783
19.	Cash, cash equivalents and short-term investments:		
19.1	Beginning of year.....	4,525,862	2,876,079
19.2	End of year (Line 18 plus Line 19.1).....	2,451,510	4,525,862

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001		
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Pt. 1-Premiums Earned
NONE

Pt. 1A-Recapitulation of All Premiums
NONE

PATRONS OXFORD INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business		1	Reinsurance Assumed		Reinsurance Ceded		6
		Direct Business (a)	2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	Net Premiums Written (Cols. 1 + 2 + 3 - 4 - 5)
1.	Fire.....	506,422			506,422		0
2.	Allied lines.....	408,932			408,932		0
3.	Farmowners multiple peril.....						0
4.	Homeowners multiple peril.....	16,207,175			16,207,175		0
5.	Commercial multiple peril.....						0
6.	Mortgage guaranty.....						0
8.	Ocean marine.....						0
9.	Inland marine.....	143,249			143,249		0
10.	Financial guaranty.....						0
11.1	Medical professional liability - occurrence.....						0
11.2	Medical professional liability - claims-made.....						0
12.	Earthquake.....						0
13.	Group accident and health.....						0
14.	Credit accident and health (group and individual).....						0
15.	Other accident and health.....						0
16.	Workers' compensation.....						0
17.1	Other liability - occurrence.....	275,625			275,625		0
17.2	Other liability - claims-made.....						0
17.3	Excess workers' compensation.....						0
18.1	Products liability - occurrence.....						0
18.2	Products liability - claims-made.....						0
19.1, 19.2	Private passenger auto liability.....	7,731,958			7,731,958		0
19.3, 19.4	Commercial auto liability.....						0
21.	Auto physical damage.....	10,741,774			10,741,774		0
22.	Aircraft (all perils).....						0
23.	Fidelity.....						0
24.	Surety.....						0
26.	Burglary and theft.....						0
27.	Boiler and machinery.....						0
28.	Credit.....						0
29.	International.....						0
30.	Warranty.....						0
31.	Reinsurance - nonproportional assumed property.....	XXX					0
32.	Reinsurance - nonproportional assumed liability.....	XXX					0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX					0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
35.	TOTALS.....	36,015,135	0	0	36,015,135	0	0

DETAILS OF WRITE-INS

3401.	.....						0
3402.	.....						0
3403.	.....						0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]
If yes: 1. The amount of such installment premiums \$.0.
2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$.0.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

		Losses Paid Less Salvage				5	6	7	8
		1	2	3	4				
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire.....	111,612		111,612	0			0	0.0
2.	Allied lines.....	56,630		56,630	0			0	0.0
3.	Farmowners multiple peril.....				0			0	0.0
4.	Homeowners multiple peril.....	6,448,437		6,448,437	0			0	0.0
5.	Commercial multiple peril.....				0			0	0.0
6.	Mortgage guaranty.....				0			0	0.0
8.	Ocean marine.....				0			0	0.0
9.	Inland marine.....	34,123		34,123	0			0	0.0
10.	Financial guaranty.....				0			0	0.0
11.1	Medical professional liability - occurrence.....				0			0	0.0
11.2	Medical professional liability - claims-made.....				0			0	0.0
12.	Earthquake.....				0			0	0.0
13.	Group accident and health.....				0			0	0.0
14.	Credit accident and health (group and individual).....				0			0	0.0
15.	Other accident and health.....				0			0	0.0
16.	Workers' compensation.....				0			0	0.0
17.1	Other liability - occurrence.....	1,443		1,443	0			0	0.0
17.2	Other liability - claims-made.....				0			0	0.0
17.3	Excess workers' compensation.....				0			0	0.0
18.1	Products liability - occurrence.....				0			0	0.0
18.2	Products liability - claims-made.....				0			0	0.0
19.1, 19.2	Private passenger auto liability.....	6,655,569		6,655,569	0			0	0.0
19.3, 19.4	Commercial auto liability.....				0			0	0.0
21.	Auto physical damage.....	4,406,134		4,406,134	0			0	0.0
22.	Aircraft (all perils).....				0			0	0.0
23.	Fidelity.....				0			0	0.0
24.	Surety.....				0			0	0.0
26.	Burglary and theft.....				0			0	0.0
27.	Boiler and machinery.....				0			0	0.0
28.	Credit.....				0			0	0.0
29.	International.....				0			0	0.0
30.	Warranty.....				0			0	0.0
31.	Reinsurance - nonproportional assumed property.....	XXX			0			0	0.0
32.	Reinsurance - nonproportional assumed liability.....	XXX			0			0	0.0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX			0			0	0.0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0.0
35.	TOTALS.....	17,713,947	0	17,713,947	0	0	0	0	0.0
DETAILS OF WRITE-INS									
3401.	.....				0			0	0.0
3402.	.....				0			0	0.0
3403.	.....				0			0	0.0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	XXX
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reported Losses				Incurred But Not Reported			8	9
		1	2	3	4	5	6	7		
Line of Business		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire.....				0				0	
2.	Allied lines.....	84,800		84,800	0				0	
3.	Farmowners multiple peril.....				0				0	
4.	Homeowners multiple peril.....	3,818,911		3,818,911	0	650,000		650,000	0	
5.	Commercial multiple peril.....				0				0	
6.	Mortgage guaranty.....				0				0	
8.	Ocean marine.....				0				0	
9.	Inland marine.....				0				0	
10.	Financial guaranty.....				0				0	
11.1	Medical professional liability - occurrence.....				0				0	
11.2	Medical professional liability - claims-made.....				0				0	
12.	Earthquake.....				0				0	
13.	Group accident and health.....				0				(a) 0	
14.	Credit accident and health (group and individual).....				0				0	
15.	Other accident and health.....				0				(a) 0	
16.	Workers' compensation.....				0				0	
17.1	Other liability - occurrence.....				0				0	
17.2	Other liability - claims-made.....				0				0	
17.3	Excess workers' compensation.....				0				0	
18.1	Products liability - occurrence.....				0				0	
18.2	Products liability - claims-made.....				0				0	
19.1, 19.2	Private passenger auto liability.....	5,676,487		5,676,487	0	2,100,000		2,100,000	0	
19.3, 19.4	Commercial auto liability.....				0				0	
21.	Auto physical damage.....	392,917		392,917	0				0	
22.	Aircraft (all perils).....				0				0	
23.	Fidelity.....				0				0	
24.	Surety.....				0				0	
26.	Burglary and theft.....				0				0	
27.	Boiler and machinery.....				0				0	
28.	Credit.....				0				0	
29.	International.....				0				0	
30.	Warranty.....				0				0	
31.	Reinsurance - nonproportional assumed property.....	XXX			0	XXX			0	
32.	Reinsurance - nonproportional assumed liability.....	XXX			0	XXX			0	
33.	Reinsurance - nonproportional assumed financial lines.....	XXX			0	XXX			0	
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0
35.	TOTALS.....	9,973,115	0	9,973,115	0	2,750,000	0	2,750,000	0	0
DETAILS OF WRITE-INS										
3401.	.....				0				0	
3402.	.....				0				0	
3403.	.....				0				0	
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0

(a) Including \$.....0 for present value of life indemnity claims.

PATRONS OXFORD INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct.....	1,074,540			1,074,540
1.2 Reinsurance assumed.....				0
1.3 Reinsurance ceded.....	2,666,558			2,666,558
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	(1,592,018)	0	0	(1,592,018)
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....		6,724,202		6,724,202
2.2 Reinsurance assumed, excluding contingent.....				0
2.3 Reinsurance ceded, excluding contingent.....		12,839,427		12,839,427
2.4 Contingent - direct.....		958,264		958,264
2.5 Contingent - reinsurance assumed.....				0
2.6 Contingent - reinsurance ceded.....				0
2.7 Policy and membership fees.....				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7).....	0	(5,156,961)	0	(5,156,961)
3. Allowances to manager and agents.....				0
4. Advertising.....		95,592		95,592
5. Boards, bureaus and associations.....		37,804		37,804
6. Surveys and underwriting reports.....		349,732		349,732
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....	850,361	2,089,451		2,939,812
8.2 Payroll taxes.....	60,445	141,938		202,383
9. Employee relations and welfare.....	241,925	573,880		815,805
10. Insurance.....	4,723	11,661		16,384
11. Directors' fees.....	52,868	52,395		105,264
12. Travel and travel items.....	20,765	89,917		110,682
13. Rent and rent items.....	63,000	147,000		210,000
14. Equipment.....	13,105	31,892		44,997
15. Cost or depreciation of EDP equipment and software.....	11,487	26,803		38,290
16. Printing and stationery.....	46,075	61,282		107,358
17. Postage, telephone and telegraph, exchange and express.....	75,891	176,987		252,879
18. Legal and auditing.....	12,552	29,289		41,841
19. Totals (Lines 3 to 18).....	1,453,197	3,915,624	0	5,368,821
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....		843,653		843,653
20.2 Insurance department licenses and fees.....		41,740		41,740
20.3 Gross guaranty association assessments.....				0
20.4 All other (excluding federal and foreign income and real estate).....		7,537		7,537
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	0	892,930	0	892,930
21. Real estate expenses.....		(172)	97,001	96,828
22. Real estate taxes.....			41,943	41,943
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	138,821	348,580	0	487,401
25. Total expenses incurred.....	0	(0)	138,944	(a).....138,944
26. Less unpaid expenses - current year.....				0
27. Add unpaid expenses - prior year.....				0
28. Amounts receivable relating to uninsured plans, prior year.....				0
29. Amounts receivable relating to uninsured plans, current year.....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....	0	(0)	138,944	138,944

DETAILS OF WRITE-INS

2401. Donations.....		37,520		37,520
2402. Technology Expense.....	127,089	301,021		428,110
2403. Miscellaneous.....	11,732	10,039		21,771
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	138,821	348,580	0	487,401

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds.....	(a).....(977)	.....(977)
1.1	Bonds exempt from U.S. tax.....	(a).....	.....
1.2	Other bonds (unaffiliated).....	(a).....	.....
1.3	Bonds of affiliates.....	(a).....	.....
2.1	Preferred stocks (unaffiliated).....	(b).....	.....
2.11	Preferred stocks of affiliates.....	(b).....	.....
2.2	Common stocks (unaffiliated).....	.....	.....
2.21	Common stocks of affiliates.....	.....	.....
3.	Mortgage loans.....	(c).....	.....
4.	Real estate.....	(d).....210,000	.....210,000
5.	Contract loans.....	.....	.....
6.	Cash, cash equivalents and short-term investments.....	(e).....	.....
7.	Derivative instruments.....	(f).....	.....
8.	Other invested assets.....	.....	.....
9.	Aggregate write-ins for investment income.....	0	0
10.	Total gross investment income.....	209,023	209,023
11.	Investment expenses.....		(g).....138,944
12.	Investment taxes, licenses and fees, excluding federal income taxes.....		(g).....
13.	Interest expense.....		(h).....33,341
14.	Depreciation on real estate and other invested assets.....		(i).....53,182
15.	Aggregate write-ins for deductions from investment income.....		0
16.	Total deductions (Lines 11 through 15).....		225,467
17.	Net investment income (Line 10 minus Line 16).....		(16,444)

DETAILS OF WRITE-INS

0901.	.....	.....	.....
0902.	.....	.....	.....
0903.	.....	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page.....	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	0	0
1501.	.....	.....	.....
1502.	.....	.....	.....
1503.	.....	.....	.....
1598.	Summary of remaining write-ins for Line 15 from overflow page.....	.....	0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....	.....	0
(a)	Includes \$.....0 accrual of discount less \$.....725 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(b)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.		
(c)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(d)	Includes \$.....210,000 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.		
(e)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(f)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium.		
(g)	Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.		
(h)	Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.		
(i)	Includes \$.....53,182 depreciation on real estate and \$.....0 depreciation on other invested assets.		

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. government bonds.....	.....	0	.....	.....
1.1	Bonds exempt from U.S. tax.....	.....	0	.....	.....
1.2	Other bonds (unaffiliated).....	.....	0	.....	.....
1.3	Bonds of affiliates.....	.....	0	.....	.....
2.1	Preferred stocks (unaffiliated).....	.....	0	.....	.....
2.11	Preferred stocks of affiliates.....	.....	0	.....	.....
2.2	Common stocks (unaffiliated).....	.....	0	.....	.....
2.21	Common stocks of affiliates.....	.....	0	.....	.....
3.	Mortgage loans.....	.....	0	.....	.....
4.	Real estate.....	.....	0	.....	.....
5.	Contract loans.....	.....	0	.....	.....
6.	Cash, cash equivalents and short-term investments.....	.....	0	.....	.....
7.	Derivative instruments.....	.....	0	.....	.....
8.	Other invested assets.....	.....	0	.....	.....
9.	Aggregate write-ins for capital gains (losses).....	0	0	0	0
10.	Total capital gains (losses).....	0	0	0	0

DETAILS OF WRITE-INS

0901.	.....	.....	0	.....	.....
0902.	.....	.....	0	.....	.....
0903.	.....	.....	0	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page....	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	0	0	0	0

PATRONS OXFORD INSURANCE COMPANY
EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			.....0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			.....0
2.2 Common stocks.....			.....0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			.....0
3.2 Other than first liens.....			.....0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			.....0
4.2 Properties held for the production of income.....			.....0
4.3 Properties held for sale.....			.....0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			.....0
6. Contract loans.....			.....0
7. Derivatives (Schedule DB).....			.....0
8. Other invested assets (Schedule BA).....	.....200,000	.....200,000	.....0
9. Receivables for securities.....			.....0
10. Securities lending reinvested collateral assets (Schedule DL).....			.....0
11. Aggregate write-ins for invested assets.....	.....0	.....0	.....0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	.....200,000	.....200,000	.....0
13. Title plants (for Title insurers only).....			.....0
14. Investment income due and accrued.....			.....0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	.....13,139	.....19,702	.....6,563
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	.....8,613	.....8,005	.....(608)
15.3 Accrued retrospective premiums.....			.....0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			.....0
16.2 Funds held by or deposited with reinsured companies.....			.....0
16.3 Other amounts receivable under reinsurance contracts.....			.....0
17. Amounts receivable relating to uninsured plans.....			.....0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			.....0
18.2 Net deferred tax asset.....	.....360,418	.....208,990	.....(151,428)
19. Guaranty funds receivable or on deposit.....			.....0
20. Electronic data processing equipment and software.....	.....79,027	.....98,953	.....19,926
21. Furniture and equipment, including health care delivery assets.....	.....8,685	.....14,476	.....5,791
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.....0
23. Receivables from parent, subsidiaries and affiliates.....			.....0
24. Health care and other amounts receivable.....			.....0
25. Aggregate write-ins for other than invested assets.....	.....0	.....22,893	.....22,893
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	.....669,883	.....573,019	.....(96,864)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.....0
28. TOTALS (Lines 26 and 27).....	.....669,883	.....573,019	.....(96,864)

DETAILS OF WRITE-INS

1101. ....			.....0
1102. ....			.....0
1103. ....			.....0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.....0	.....0	.....0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	.....0	.....0	.....0
2501. Non-vested pension.....		.....22,893	.....22,893
2502. ....			.....0
2503. ....			.....0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.....0	.....0	.....0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	.....0	.....22,893	.....22,893

PATRONS OXFORD INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies:

A. Accounting Practices

The accompanying financial statements of Patrons Oxford Insurance Company have been prepared on the basis of accounting practices prescribed or permitted by the Maine Insurance Department.

The state of Maine requires insurance companies domiciled in the state of Maine to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual subject to any deviations prescribed or permitted by the Maine Insurance Department.

Description	2013	2012
1. Net Income (loss) , ME basis	\$ 110,520	\$ 252,986
2. Effect of ME prescribed practices	-	-
3. Effect of ME permitted practices	-	-
4. Net Income (loss) , NAIC SAP basis	\$ 110,520	\$ 252,986

Description	2013	2012
5. Policyholders' surplus , ME basis	\$ 7,068,685	\$ 7,027,683
6. Effect of ME prescribed practices	-	-
7. Effect of ME permitted practices	-	-
8. Policyholders' surplus , NAIC SAP basis	\$ 7,068,685	\$ 7,027,683

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, revenues and expenses. It also requires estimates in the disclosure of contingent assets and liabilities. Actual results could differ from these estimates.

C. Accounting Policies

Premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premiums are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance assumed. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

- 1. Short-term investments are stated at amortized value using the interest method. Non-investment grade short-term investments are stated at the lower of amortized value or fair value.
- 2. Bonds not backed by other loans are stated at amortized value using the interest method. Non-investment grade bonds are stated at the lower of amortized value or fair value.
- 3. Common stocks, other than investments in stocks of subsidiaries and affiliates, are stated at market.
- 4. Not applicable
- 5. Not applicable
- 6. Not applicable
- 7. Not applicable
- 8. Not applicable
- 9. Not applicable
- 10. The Company does not anticipate investment income as a factor in premium deficiency calculations.
- 11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.
- 12. The Company did not modify its capitalization policy from the prior period.
- 13. The Company does not write medical insurance

2. Accounting Changes and Corrections of Errors:

- A. Changes in Accounting Principles and Correction of Errors
Not applicable

- 3. Business Combinations and Goodwill:
Not applicable

- 4. Discontinued Operations:
Not applicable

5. Investments:

- A. Mortgage Loans, including Mezzanine Real Estate Loans
Not applicable
- B. Debt Restructuring
Not applicable
- C. Reverse Mortgages
Not applicable
- D. Loan-Backed Securities
Not applicable
- E. Repurchase Agreements
Not applicable
- F. Real Estate
Not applicable

NOTES TO FINANCIAL STATEMENTS

G. Investments in Low-income Housing Tax Credits
Not applicable

H. Restricted Assets
The Company has restricted assets in the form of a U.S. government security which is currently a required state deposit with Maine. The admitted restricted asset value at December 31, 2013 was \$146,000.

6. Joint Ventures, Partnerships and Limited Liability Companies:

A. Detail for Those Greater than 10% of Admitted Assets
Not applicable

B. Write downs for Impairments
Not applicable

7. Investment Income:

A. Accrued Investment Income
Not applicable

B. Amounts Non-admitted
Not applicable

8. Derivative Instruments:
Not applicable

9. Income Taxes:

A. Components of deferred tax assets (DTAs) and deferred tax liabilities (DTLs):

(1) DTA/DTL Components:

Description	2013			2012			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Gross deferred tax assets	663,045	0	663,045	661,684	0	661,684	1,361	0	1,361
(b) Statutory valuation allowance adjustment	0	0	0	0	0	0	0	0	0
(c) Adjusted gross deferred tax assets	663,045	0	663,045	661,684	0	661,684	1,361	0	1,361
(d) Adjusted gross deferred tax assets nonadmitted	(360,418)	0	(360,418)	(208,990)	0	(208,990)	(151,428)	0	(151,428)
(e) Admitted adjusted gross deferred tax asset	302,627	0	302,627	452,694	0	452,694	(150,067)	0	(150,067)
(f) Gross deferred tax liabilities	(96,388)	0	(96,388)	(122,372)	0	(122,372)	25,984	0	25,984
(g) Net admitted deferred tax asset/(liability)	206,239	0	206,239	330,322	0	330,322	(124,083)	0	(124,083)

(2) Admission calculation components:

Description	2013			2012			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Admitted pursuant to ¶11.a.	150,277	0	150,277	1,007	0	1,007	149,270	0	149,270
(b) Admitted pursuant to ¶11.b.	55,962	0	55,962	206,943	0	206,943	(150,981)	0	(150,981)
Realization per ¶11.b.i.	55,962	0	55,962	206,943	0	206,943	(150,981)	0	(150,981)
Limitation per ¶11.b.ii.	N/A	N/A	0	N/A	N/A	0	N/A	N/A	0
(c) Admitted pursuant to ¶11.c.	96,388	0	96,388	122,372	0	122,372	(25,984)	0	(25,984)
(d) Total admitted deferred tax asset	302,627	0	302,627	330,322	0	330,322	(27,695)	0	(27,695)

(3) Used in ¶11.b.

	2013	2012
(a) Applicable ratio for realization limitation threshold table	18164%	14383%
(b) Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation	\$ 6,883,243	\$ 6,803,432

(4) Impact of tax planning strategies (TPS) on adjusted gross DTAs and net admitted DTAs:
The Company is not currently utilizing any tax planning strategies.

B. Temporary differences for which a DTL has not been established:
Not applicable

PATRONS OXFORD INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

C. Significant components of income taxes incurred.

(1) Current income taxes incurred consist of the following major components:

Description	2013	2012	Change
(a) Current federal income tax expense / (benefit)	150,277	1,008	149,269
(b) Foreign Income tax expense / (benefit)	0	0	0
(c) Subtotal	150,277	1,008	149,269
(d) Tax expense / (benefit) on realized capital gains / (losses)	0	0	0
(e) Utilization of capital loss carryforwards	0	0	0
(f) Other, including prior year underaccrual (overaccrual)	9,296	6,789	2,507
(g) Federal and foreign income taxes incurred	159,572	7,797	151,775

The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and liabilities are as follows:

(2) DTAs Resulting From

Book/Tax Differences In	2013	2012	Change
(a) Ordinary			
(1) Discounting of unpaid losses and LAE	0	0	0
(2) Unearned premiums	0	0	0
(3) Advanced Premiums	27,093	25,192	1,901
(4) Investments	0	0	0
(5) Deferred acquisition costs	0	0	0
(7) Fixed assets	0	0	0
(8) Compensation and benefit accruals	527,640	509,083	18,558
(9) Pension accruals	0	0	0
(10) Nonadmitted assets	108,313	127,410	(19,097)
(11) Net operating loss carryforward	0	0	0
(13) Other--salvage and subrogation	0	0	0
(99) Subtotal - Gross ordinary DTAs	663,045	661,684	1,361
(b) Statutory valuation adjustment adjustment - ordinary (-)	0	0	0
(c) Nonadmitted ordinary DTAs (-)	360,418	208,990	151,428
(d) Admitted ordinary DTAs	302,627	452,694	(150,067)
(e) Capital			
(1) Investments	0	0	0
(2) Net capital loss carryforward	0	0	0
(3) Real estate	0	0	0
(4) Other (separately disclose items >5%)	0	0	0
(5) Unrealized capital losses	0	0	0
(99) Gross capital DTAs	0	0	0
(f) Statutory valuation adjustment adjustment - capital (-)	0	0	0
(g) Nonadmitted capital DTAs (-)	0	0	0
(h) Admitted capital DTAs	0	0	0
(i) Admitted DTAs	302,627	452,694	(150,067)

PATRONS OXFORD INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

(3)	DTLs Resulting From			
	Book/Tax Differences In	2013	2012	Change
	(a) Ordinary			
	(1) Investments	0	0	0
	(2) Fixed assets	35,318	51,615	(16,296)
	(3) Deferred and uncollected premiums	27,093	25,192	1,901
	(4) Policyholder reserves/salvage and subrogation	0	0	0
	(5) Other--building sale	33,977	37,554	(3,576)
	(6) Other (separately disclose items >5%)	0	8,013	(8,013)
	(99) Ordinary DTLs	96,388	122,372	(25,984)
	(b) Capital			
	(1) Investments	0	0	0
	(2) Real estate	0	0	0
	(3) Other (separately disclose items >5%)	0	0	0
	(4) Unrealized capital gains	0	0	0
	(99) Capital DTLs	0	0	0
	(c) DTLs	96,388	122,372	(25,984)
(4)	Net deferred tax assets/liabilities	206,239	330,322	(124,083)

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	2013	2012	Change
Total deferred tax assets	663,045	661,684	1,361
Total deferred tax liabilities	96,388	122,372	(25,984)
Net deferred tax assets/liabilities	566,657	539,312	27,345
Statutory valuation allowance adjustment	0	0	0
Net deferred tax assets/liabilities after SVA	566,657	539,312	27,345
Tax effect of unrealized gains/(losses)			0
Statutory valuation allowance adjustment allocated to unrealized (+)			0
Other intraperiod allocation of deferred tax movement			0
Change in net deferred income tax [(charge)/benefit]			27,345

D. Reconciliation of total statutory income taxes reported to tax at statutory tax rate:

The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes including realized capital gains / losses. The significant items causing this difference are as follows:

		Statutory Rate	
		35.00%	Effective Tax
Description	Amount	Tax Effect	Rate
Income Before Taxes (including all realized capital gains / (losses))	270,093	94,532	35.00%
Change in Non-Admitted Assets	54,564	19,097	7.07%
Meals & Entertainment, Lobbying Expenses, Etc.	26,577	9,302	3.44%
Other, Including Prior Year True-Up	26,559	9,296	3.44%
Total	377,792	132,227	48.96%
Federal income taxed incurred [expense/(benefit)]		159,572	59.08%
Change in net deferred income tax [charge/(benefit)]		(27,345)	-10.12%
Total statutory income taxes		132,227	48.96%

PATRONS OXFORD INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

- E. Carryforwards, recoverable taxes, and IRC §6603 deposits:
- (1) At December 31, 2013, the Company does not have an operating loss carryforward.

(2) Income taxes, ordinary and capital, available for recoupment in the event of future losses include:
- | Available from tax year | Ordinary | Capital | Total |
|-------------------------|----------|---------|---------|
| 2013 | 159,572 | 0 | 159,572 |
| 2012 | 2,878 | 0 | 2,878 |
| Total | 162,450 | - | 162,450 |
- (3) The Company has no tax deposits under Section 6603 of the Internal Revenue Code
- F. Consolidated Federal Tax Return
- (1) The Company's federal income tax return will be consolidated with its' parent, Quincy Mutual

(2) Pursuant to a Tax Sharing Agreement, federal income taxes are allocated to each company as if it was filing on a separate return basis. The tax benefits of losses are credited to the members of the extent used by the consolidated group.
- G. Income tax loss contingencies
- The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of reporting date.
10. Information Concerning Parent, Subsidiaries and Affiliates:
- A. Nature of Relationships

The company is a wholly owned subsidiary of Quincy Mutual Fire Insurance Company (Parent), a mutual insurance company incorporated in Massachusetts.

B. Detail of Transactions Greater than ½% of Admitted Assets

Not applicable

C. Change in Terms of Intercompany Arrangements

None

D. Amounts Due to or from Related Parties

At December 31, 2013 the Company reported \$ 132,386, as amounts due the Company. The terms of the settlement require that these amounts are settled monthly in arrears.

E. Guarantees or Contingencies for Related Parties

Not applicable

F. Management, Service Contracts, Cost Sharing Arrangements

In the interests of economy, efficiency, and other advantages in business operations, Quincy Mutual provides support services for the Company.

G. Nature of Relationships that Could Affect Operations

All outstanding shares of the Company are owned by Parent.

H. Amount Deducted for Investment in Upstream Company

Not applicable

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

Not applicable

J. Write down for Impairments of Investments in Subsidiary, Controlled or Affiliated Companies

Not applicable

K. Investment in a Foreign Insurance Subsidiary

Not applicable
11. Debt:
- All Other Debt
- Not applicable
12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans:
- A. Defined Benefit Plans

Not applicable

B. Defined Contribution Plans

Patrons Oxford Insurance Company employees are covered by a qualified defined contribution 401(k) and Profit Sharing Plan sponsored by the Quincy Mutual Fire Insurance Company.

Employees may defer up to the IRS maximum of their pretax earnings with an employer match of up to 3% of pretax earnings. In addition, the Board of Directors may approve a profit sharing benefit up to 7% of an employee's pretax earnings, which is deferred into the plan and subject to a vesting schedule based on years of service. The company accrued a profit sharing benefit of \$109,556 and \$112,121 in 2013 and 2012, respectively, which is paid in the following year.

In addition, the Company has a non-qualified supplemental executive retirement plan ("SERP") for senior management. The statement includes an accrued liability for the SERP at December 31, 2013.

PATRONS OXFORD INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

- C. Multiemployer Plans
Not applicable
- D. Consolidated/Holding Company Plans
Not applicable
- E. Postemployment Benefits and Compensated Absences
Not applicable
13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations:
- (1) Outstanding Shares
The Company has 5,000,000 shares authorized, 2,500,000 shares issued, and 2,500,000 shares outstanding.

(2) Dividend Rate of Preferred Stock
Not applicable

(3) Dividend Restrictions
The Company is subject to regulatory restrictions with respect to statutory surplus levels and dividends.

(4) Dates and Amounts of Dividends Paid
None

(5) Portion of Profit Paid as Dividends to Stockholders
Within the limits of (3) above, these annual dividends cannot exceed the greater of 10% of the insurer's unassigned surplus as of the prior year end or the net investment income of the prior year end.

(6) Restrictions on Surplus
None

(7) Surplus Advances
Not applicable

(8) Company Stock Held for Special Purposes
Not applicable

(9) Changes in Special Surplus Funds
Not applicable

(10) Changes in Unassigned Surplus
The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains & losses is as follows:
None

(11) Surplus Notes
None

(12) Quasi Reorganization
Not applicable

(13) Quasi Reorganization Effective Dates
Not applicable
14. Contingencies:
- A. Contingent Commitments
Not applicable

B. Assessments
The company is subject to guaranty fund and other assessments by the states in which it writes business. Guaranty fund assessments should be accrued at the time of insolvencies. Other assessments should be accrued either at the time of assessments or in the case of premium based assessments, at the time the premiums were written, or, in the case of loss based assessments, at the time the losses are incurred.

As of December 31, 2013, the Company has received no notification for insolvencies; therefore, there is no year-end accrued assessment.

C. Gain Contingencies
Not applicable

D. Claims related extra contractual obligation and bad faith losses stemming from lawsuits
The Company did not incur any material claims related to extra contractual obligations or bad faith losses stemming from lawsuits in 2013 and 2012. The Company may contribute to a claim settlement where the coverage is deemed questionable, but such payments are not in excess of policy limits nor are they mandated by law or mediation, but rather as a negotiated settlement with customers.

E. Product Warranties
Not applicable

F. All Other Contingencies
At December 31, 2013 and 2012, the Company had admitted assets of \$6,507,965 and \$6,048,264, respectively in premiums receivable due from policyholders, agents and ceding insurers. The Company routinely assesses the collectability of these receivables. Based upon Company experience, any uncollectible premiums receivable as of December 31, 2013 are not expected to exceed the non-admitted amounts totaling \$21,752 and, therefore, no additional provision for uncollectible amounts has been recorded. The potential for any additional loss is not believed to be material to the Company's financial condition.

Lawsuits arise against the Company in the normal course of business. Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the financial position of the Company. The Company has no assets that it considers impaired.
15. Leases
The Company does not have any material lease obligations.

PATRONS OXFORD INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk:
Not applicable
17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities:

A. Transfers of Receivables Reported as Sales
Not applicable

B. Transfers and Servicing of Financial Assets
Not applicable

C. Wash Sales
Not applicable
18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans:
Not applicable
19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators:
Not applicable
20. Fair value Measurement:
The Company does not have any assets or liabilities that are measured by fair value.
21. Other Items:

A. Extraordinary Items
Not applicable

B. Troubled Debt Restructuring for Debtors
Not applicable

C. Other Disclosures
Not applicable

D. Business Interruption Insurance Recoveries:
Not applicable

E. State Transferable and Non-transferable Tax Credits
Not applicable

F. Subprime Mortgage Related Risk Exposure
Not applicable
22. Events Subsequent:

A. Subsequent events have been considered through February 13, 2014, for the statutory statements issued on February 14, 2014. There were no events occurring subsequent to the end of the year that merited recognition or disclosure in these statements
23. Reinsurance:

A. Unsecured Reinsurance Recoverable
Not applicable

B. Reinsurance Recoverable in Dispute
Not applicable

C. Reinsurance Assumed and Ceded

As of January 1, 2012, Quincy Mutual Fire Insurance Company and Patrons Oxford Insurance Company have a Personal Lines Quota Share Reinsurance Contract.

1. The following table summarizes ceded and assumed unearned premiums and the related commission equity at December 31, 2013.

	Assumed Reinsurance		Ceded Reinsurance		Net	
(1)	(1)	(2)	(3)	(4)	(5)	(6)
	Prem Reserve	Comm Equity	Prem Reserve	Comm Equity	Prem Reserve	Comm Equity
(a) Affiliates	-	-	18,782,260	6,698,810	(18,782,260)	(6,698,810)
(b) All Other	-	-	-	-	-	-
(c) Total	-	-	18,782,260	6,698,810	(18,782,260)	(6,698,810)

(d) Direct Unearned Premium Reserve \$18,782,260

(2) Reinsurance
None

D. Uncollectible Reinsurance
Not applicable

E. Commutation of Ceded Reinsurance
Not applicable

F. Retroactive Reinsurance
Not applicable

G. Reinsurance Accounted for as a Deposit
Not applicable

H. Disclosure for the Transfer of Property and Casualty Run-off Agreements
Not applicable
24. Retrospectively Rated Contracts & Contracts Subject to Redetermination:
Not applicable

NOTES TO FINANCIAL STATEMENTS

25. Change in Incurred Losses and Loss Adjustment Expenses:
Not applicable. The company cedes all business to Quincy Mutual Fire Insurance Company and has no net loss.

26. Intercompany Pooling Arrangements:

A. Effective 12/31/2011, the inter-company pooling agreement between Quincy Mutual, Patrons Oxford and New England Mutual was terminated. All the liabilities between Quincy Mutual and New England Mutual were commuted effective 12/31/11. During 2012, runoff of pooled business between Quincy Mutual and Patrons Oxford was settled quarterly with a commutation of all unpaid liabilities at 12/31/2012.

	2013	2012
Quincy Mutual Fire Insurance Company (Lead Entity)	-	1,427,772
Patrons Oxford Insurance Company	-	(1,427,772)
New England Mutual Insurance Company		
Total	\$ -	\$ -

- B. Not applicable
- C. Not applicable
- D. Not applicable
- E. Not applicable
- F. Not applicable
- G. Not applicable
27. Structured Settlements:
- A. Reserves Released due to Purchase of Annuities
The company does not purchase annuities from life insurers with an A+ or better rating with A.M. best with the claimant as payee.
- B. Annuity Insurers with Balances due Greater than 1% of Policyholder's Surplus
Not applicable
28. Health Care Receivables:
Not applicable
29. Participating Policies:
Not applicable
30. Premium Deficiency Reserves:
Not applicable
31. High Deductibles:
Not applicable
32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses:
Not applicable
33. Asbestos/Environmental Reserves:
Not applicable
34. Subscriber Savings Accounts:
Not applicable
35. Multiple Peril Crop Insurance:
Not applicable
36. Financial Guaranty Insurance:
Not applicable

PATRONS OXFORD INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1, 1A and 2.

Yes [X] No []

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [X] No [] N/A []

1.3

State regulating? MA

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]

2.2

If yes, date of change:

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2009

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity.
This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2009

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

04/25/2001

3.4

By what department or departments?
Maine Bureau of Insurance

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments?

Yes [X] No [] N/A []

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [X] No [] N/A []

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11

sales of new business?

Yes [] No [X]

4.12

renewals?

Yes [] No [X]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21

sales of new business?

Yes [] No [X]

4.22

renewals?

Yes [] No [X]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]

5.2

If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Co. Code	State of Domicile

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [] No [X]

6.2

If yes, give full information:

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [] No [X]

7.2

If yes,

7.21

State the percentage of foreign control

.....%

7.22

State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact)

1	2
Nationality	Type of Entity

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [] No [X]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [] No [X]

8.4

If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
PriceWaterhouseCoopers, LLP, 125 High St., Boston MA 02110

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No [X]

10.2

If the response to 10.1 is yes, provide information related to this exemption:

10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]

10.4

If the response to 10.3 is yes, provide information related to this exemption:

PART 1 - COMMON INTERROGATORIES - FINANCIAL

22.1

Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?

Yes [☐] No [☒]

22.2

If answer is yes:

22.21 Amount paid as losses or risk adjustment

22.22 Amount paid as expenses

22.23 Other amounts paid

23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [☐] No [☒]

23.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount.

PART 1 - COMMON INTERROGATORIES - INVESTMENT

24.01

Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?

Yes [☐] No [☒]

24.02

If no, give full and complete information relating thereto.

Key Banc

Schedule D

24.03

For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).

24.04

Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions?

Yes [☐] No [☐] N/A [☒]

24.05

If answer to 24.04 is yes, report amount of collateral for conforming programs.

24.06

If answer to 24.04 is no, report amount of collateral for other programs.

24.07

Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?

Yes [☐] No [☐] N/A [☒]

24.08

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

Yes [☐] No [☐] N/A [☒]

24.09

Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?

Yes [☐] No [☐] N/A [☒]

24.10

For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

24.103 Total payable for securities lending reported on the liability page.

25.1

Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03)

Yes [☒] No [☐]

25.2

If yes, state the amount thereof at December 31 of the current year:

25.21 Subject to repurchase agreements

25.22 Subject to reverse repurchase agreements

25.23 Subject to dollar repurchase agreements

25.24 Subject to reverse dollar repurchase agreements

25.25 Pledged as collateral

25.26 Placed under option agreements

25.27 Letter stock or securities restricted as to sale

25.28 On deposit with state or other regulatory body

25.29 Other

25.3

For category (25.27) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1

Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes [☐] No [☒]

26.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes [☐] No [☐] N/A [☒]

If no, attach a description with this statement.

27.1

Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes [☐] No [☒]

27.2

If yes, state the amount thereof at December 31 of the current year:

28.

Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [☐] No [☒]

28.01

For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address

28.02

For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

28.03

Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes [☐] No [☒]

28.04

If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

28.05

Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address

29.1

Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes [☐] No [☒]

PART 1 - COMMON INTERROGATORIES - INVESTMENT

29.2 If yes, complete the following schedule:

1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
29.2999. TOTAL		0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
Name of Mutual Fund (from the above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to Holding	Date of Valuation

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds.....	.....146,000	.....148,928	.....2,928
30.2 Preferred stocks.....			.....0
30.3 Totals.....	.....146,000	.....148,928	.....2,928

30.4 Describe the sources or methods utilized in determining the fair values:

Market price obtained from Quincy Mutual Fire Insurance Company's investment advisor firm, supported by Bloomberg.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes [] No [X]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

Yes [] No []

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D.

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

Yes [X] No []

32.2 If no, list exceptions:

PART 1 - COMMON INTERROGATORIES - OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

\$.....0

33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid

34.1 Amount of payments for legal expenses, if any?

\$.....0

34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?

\$.....0

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	2
Name	Amount Paid

NONE

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [☐]

No [☒ X]

1.2

If yes, indicate premium earned on U.S. business only.

1.3

What portion of item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

1.31

Reason for excluding:

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.

1.5

Indicate total incurred claims on all Medicare Supplement insurance.

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

1.62

Total incurred claims

1.63

Number of covered lives

All years prior to most current three years:

1.64

Total premium earned

1.65

Total incurred claims

1.66

Number of covered lives

1.7

Group policies:

Most current three years:

1.71

Total premium earned

1.72

Total incurred claims

1.73

Number of covered lives

All years prior to most current three years:

1.74

Total premium earned

1.75

Total incurred claims

1.76

Number of covered lives

2.

Health test:

2.1

Premium Numerator.....

\$.....0

\$.....0

2.2

Premium Denominator.....

\$.....0

\$.....1,103,253

2.3

Premium Ratio (2.1/2.2).....

.....0.0

.....0.0

2.4

Reserve Numerator.....

\$.....0

\$.....0

2.5

Reserve Denominator.....

\$.....0

\$.....1,427,769

2.6

Reserve Ratio (2.4/2.5).....

.....0.0

.....0.0

3.1

Does the reporting entity issue both participating and non-participating policies?

Yes [☐]

No [☒ X]

3.2

If yes, state the amount of calendar year premiums written on:

3.21

Participating policies

3.22

Non-participating policies

4.

FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ONLY:

4.1

Does the reporting entity issue assessable policies?

Yes [☐]

No [☐]

4.2

Does the reporting entity issue non-assessable policies?

Yes [☐]

No [☐]

4.3

If assessable policies are issued, what is the extent of the contingent liability of the policyholders?

.....%

4.4

Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.

5.

FOR RECIPROCAL EXCHANGES ONLY:

5.1

Does the exchange appoint local agents?

Yes [☐]

No [☐]

5.2

If yes, is the commission paid:

5.21

Out of Attorney's-in-fact compensation

Yes [☐]

No [☐]

N/A [☐]

5.22

As a direct expense of the exchange

Yes [☐]

No [☐]

N/A [☐]

5.3

What expenses of the exchange are not paid out of the compensation of the Attorney-in-fact?

5.4

Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?

Yes [☐]

No [☐]

5.5

If yes, give full information:

6.1

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?

Not applicable

6.2

Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:

The PML is estimated by Mgmt experience on an insured by insured basis; virtually all risks are single location. The PML would be derived from a NE hurricane. Loss estimates are based on Cat models developed by Reins. brokers. Reinsurance is purchased up to the PML on policies with property limits over \$2.5 million.

6.3

What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?

The Company maintains a catastrophe reinsurance program and has instituted a hurricane deductible program for coastal exposures.

6.4

Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?

Yes [☒ X]

No [☐]

6.5

If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss:

7.1

Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?

Yes [☐]

No [☒ X]

7.2

If yes, indicate the number of reinsurance contracts containing such provisions.

7.3

If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?

Yes [☐]

No [☐]

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

8.1

Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?

Yes []

No [X]

8.2

If yes, give full information:

9.1

Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity?

Yes []

No [X]

9.2

Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract?

Yes []

No [X]

9.3

If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4

Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?

Yes []

No [X]

9.5

If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6

The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.

Yes []

No [X]

Yes []

No [X]

Yes [X]

No []

10.

If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurance a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?

Yes []

No []

N/A [X]

11.1

Has this reporting entity guaranteed policies issued by any other reporting entity and now in force?

Yes []

No [X]

11.2

If yes, give full information:

12.1

If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the amount of corresponding liabilities recorded for:
12.11 Unpaid losses
12.12 Unpaid underwriting expenses (including loss adjustment expenses)

\$.....0

\$.....0

\$.....0

12.2

Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds:

12.3

If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?

Yes []

No []

N/A [X]

12.4

If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
12.41 From
12.42 To

.....%

.....%

12.5

Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?

Yes []

No [X]

12.6

If yes, state the amount thereof at December 31 of current year:
12.61 Letters of credit
12.62 Collateral and other funds

13.1

Largest net aggregate amount insured in any one risk (excluding workers' compensation):

\$.....0

13.2

Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?

Yes []

No [X]

13.3

State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.

.....0

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

14.1

Is the company a cedant in a multiple cedant reinsurance contract?

Yes []

No [X]

14.2

If yes, please describe the method of allocating and recording reinsurance among the cedants:

14.3

If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?

Yes []

No []

14.4

If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?

Yes []

No []

14.5

If the answer to 14.4 is no, please explain:

15.1

Has the reporting entity guaranteed any financed premium accounts?

Yes []

No [X]

15.2

If yes, give full information:

16.1

Does the reporting entity write any warranty business?

Yes []

No [X]

If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home.....					
16.12 Products.....					
16.13 Automobile.....					
16.14 Other*.....					

* Disclose type of coverage:

17.1

Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F-Part 3 that it excludes from Schedule F-Part 5?

Yes []

No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F-Part 5.

Provide the following information for this exemption:

17.11

Gross amount of unauthorized reinsurance in Schedule F-Part 3 excluded from Schedule F-Part 5

17.12

Unfunded portion of Interrogatory 17.11

17.13

Paid losses and loss adjustment expenses portion of Interrogatory 17.11

17.14

Case reserves portion of Interrogatory 17.11

17.15

Incurred but not reported portion of Interrogatory 17.11

17.16

Unearned premium portion of Interrogatory 17.11

17.17

Contingent commission portion of Interrogatory 17.11

Provide the following information for all other amounts included in Schedule F-Part 3 and excluded from Schedule F-Part 5, not included above:

17.18

Gross amount of unauthorized reinsurance in Schedule F-Part 3 excluded from Schedule F-Part 5

17.19

Unfunded portion of Interrogatory 17.18

17.20

Paid losses and loss adjustment expenses portion of Interrogatory 17.18

17.21

Case reserves portion of Interrogatory 17.18

17.22

Incurred but not reported portion of Interrogatory 17.18

17.23

Unearned premium portion of Interrogatory 17.18

17.24

Contingent commission portion of Interrogatory 17.18

18.1

Do you act as a custodian for health savings account?

Yes []

No [X]

18.2

If yes, please provide the amount of custodial funds held as of the reporting date.

18.3

Do you act as an administrator for health savings accounts?

Yes []

No [X]

18.4

If yes, please provide the balance of the funds administered as of the reporting date.

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2013	2 2012	3 2011	4 2010	5 2009
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	8,007,583	7,821,297	8,304,474	8,412,467	8,531,983
2. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	11,800,377	11,025,307	10,959,309	10,729,249	10,436,203
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	16,207,175	15,301,452	15,837,591	15,533,643	14,412,944
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
6. Total (Line 35).....	36,015,135	34,148,056	35,101,374	34,675,359	33,381,130
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....			547,393	545,578	576,690
8. Property lines (Lines 1, 2, 9, 12, 21 & 26).....			412,897	407,027	392,219
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....			1,029,318	1,052,246	1,180,452
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
12. Total (Line 35).....	0	0	1,989,608	2,004,851	2,149,361
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8).....	(0)	(19,269)	(731,888)	(162,179)	(76,825)
14. Net investment gain (loss) (Line 11).....	(16,444)	777	(9,710)	16,692	(10,299)
15. Total other income (Line 15).....	286,536	279,274	323,438	268,556	305,941
16. Dividends to policyholders (Line 17).....					
17. Federal and foreign income taxes incurred (Line 19).....	159,572	7,796	(105,155)	133,306	148,265
18. Net income (Line 20).....	110,520	252,986	(313,005)	(10,237)	70,552
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....	15,220,109	16,046,004	16,590,055	16,586,196	16,162,239
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1).....	175,400	169,166	478,868	466,747	(231,189)
20.2 Deferred and not yet due (Line 15.2).....	6,332,565	5,879,098	5,563,894	5,446,284	5,734,188
20.3 Accrued retrospective premiums (Line 15.3).....					
21. Total liabilities excluding protected cell business (Page 3, Line 26).....	8,151,424	9,018,321	9,780,503	9,367,939	8,948,147
22. Losses (Page 3, Line 1).....			961,014	885,255	881,565
23. Loss adjustment expenses (Page 3, Line 3).....			213,559	196,698	169,993
24. Unearned premiums (Page 3, Line 9).....			1,103,253	1,121,442	1,202,830
25. Capital paid up (Page 3, Lines 30 & 31).....	2,500,000	2,500,000	2,500,000	2,500,000	2,500,000
26. Surplus as regards policyholders (Page 3, Line 37).....	7,068,685	7,027,683	6,809,552	7,218,257	7,214,092
Cash Flow (Page 5)					
27. Net cash from operations (Line 11).....	(2,311,116)	1,645,752	527,591	(792,094)	260,004
Risk-Based Capital Analysis					
28. Total adjusted capital.....	7,068,685	7,027,683	6,809,552	7,218,257	7,214,092
29. Authorized control level risk-based capital.....	37,780	41,565	190,343	192,082	179,037
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1).....	4.4	2.7	3.8	4.6	3.8
31. Stocks (Lines 2.1 & 2.2).....					
32. Mortgage loans on real estate (Lines 3.1 & 3.2).....					
33. Real estate (Lines 4.1, 4.2 & 4.3).....	21.4	14.0	21.3	26.8	23.5
34. Cash, cash equivalents and short-term investments (Line 5).....	74.2	83.3	74.9	68.6	72.6
35. Contract loans (Line 6).....					
36. Derivatives (Line 7).....					XXX
37. Other invested assets (Line 8).....					
38. Receivable for securities (Line 9).....					
39. Securities lending reinvested collateral assets (Line 10).....					XXX
40. Aggregate write-ins for invested assets (Line 11).....					
41. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1).....					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....					
45. Affiliated short-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10).....					
46. Affiliated mortgage loans on real estate.....					
47. All other affiliated.....					
48. Total of above lines 42 to 47.....	0	0	0	0	0
49. Total investment in parent included in Lines 42 to 47 above.....					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0).....	0.0				

PATRONS OXFORD INSURANCE COMPANY
FIVE-YEAR HISTORICAL DATA
(Continued)

	1	2	3	4	5
	2013	2012	2011	2010	2009
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24).....					
52. Dividends to stockholders (Line 35).....					
53. Change in surplus as regards policyholders for the year (Line 38).....	41,001	218,131	(408,705)	4,165	87,866
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	6,657,012	7,069,639	5,116,339	7,021,214	4,907,100
55. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	4,608,498	4,382,063	5,012,517	4,042,963	4,039,481
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	6,448,437	6,386,228	7,301,927	6,822,841	8,279,448
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
59. Total (Line 35).....	17,713,947	17,837,930	17,430,783	17,887,018	17,226,029
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....		847,997	389,329	364,754	353,766
61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....		211,433	252,889	217,412	219,119
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....		932,473	1,062,339	657,075	661,318
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
65. Total (Line 35).....	0	1,991,903	1,704,557	1,239,241	1,234,203
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1).....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2).....		93.4	88.7	59.6	59.3
68. Loss expenses incurred (Line 3).....		12.4	12.6	10.8	9.2
69. Other underwriting expenses incurred (Line 4).....		(4.1)	35.2	37.4	35.1
70. Net underwriting gain (loss) (Line 8).....		(1.7)	(36.5)	(7.8)	(3.6)
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0).....			19.2	25.5	21.0
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....		105.8	101.3	70.4	68.4
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0).....			29.2	27.8	29.8
One Year Loss Development (000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....	0	(72)	(20)	(445)	(10)
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100).....	0.0	(1.1)	(0.3)	(6.2)	(0.1)
Two Year Loss Development (000 omitted)					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12).....	(70)	(108)	(36)	(177)	(18)
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0).....	(1.0)	(1.5)	(0.5)	(2.5)	(0.3)

If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of
SSAP No. 3, Accounting Changes and Correction of Errors?

Yes[] No[]

If no, please explain:

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....(4).....	.....(4).....	.....	.....	.....	.....	.....4.....	.....0.....	.....XXX.....
2. 2004.....	.....31,766.....	.....29,957.....	.....1,809.....	.....14,902.....	.....14,184.....	.....203.....	.....162.....	.....1,625.....	.....1,516.....	.....1,438.....	.....868.....	.....XXX.....
3. 2005.....	.....33,572.....	.....31,625.....	.....1,947.....	.....16,298.....	.....14,978.....	.....236.....	.....200.....	.....1,885.....	.....1,763.....	.....980.....	.....1,477.....	.....XXX.....
4. 2006.....	.....34,826.....	.....32,874.....	.....1,952.....	.....15,537.....	.....14,661.....	.....324.....	.....293.....	.....1,993.....	.....1,881.....	.....991.....	.....1,019.....	.....XXX.....
5. 2007.....	.....34,906.....	.....32,874.....	.....2,032.....	.....17,825.....	.....16,873.....	.....290.....	.....254.....	.....2,284.....	.....2,162.....	.....1,153.....	.....1,109.....	.....XXX.....
6. 2008.....	.....33,547.....	.....31,376.....	.....2,171.....	.....19,293.....	.....18,068.....	.....369.....	.....330.....	.....2,476.....	.....2,317.....	.....1,003.....	.....1,423.....	.....XXX.....
7. 2009.....	.....33,343.....	.....31,186.....	.....2,157.....	.....17,183.....	.....15,913.....	.....231.....	.....197.....	.....2,283.....	.....2,129.....	.....799.....	.....1,458.....	.....XXX.....
8. 2010.....	.....33,890.....	.....31,803.....	.....2,086.....	.....16,182.....	.....14,916.....	.....150.....	.....108.....	.....2,316.....	.....2,160.....	.....804.....	.....1,463.....	.....XXX.....
9. 2011.....	.....35,001.....	.....32,993.....	.....2,008.....	.....18,277.....	.....16,466.....	.....112.....	.....66.....	.....2,542.....	.....2,341.....	.....226.....	.....2,058.....	.....XXX.....
10. 2012.....	.....34,523.....	.....33,420.....	.....1,103.....	.....13,669.....	.....12,599.....	.....94.....	.....49.....	.....2,304.....	.....2,130.....	.....(313).....	.....1,289.....	.....XXX.....
11. 2013.....	.....35,064.....	.....35,064.....	.....0.....	.....12,435.....	.....12,435.....	.....8.....	.....8.....	.....2,008.....	.....2,008.....	.....653.....	.....0.....	.....XXX.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....161,598.....	.....151,090.....	.....2,017.....	.....1,668.....	.....21,716.....	.....20,408.....	.....7,739.....	.....12,165.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding- Direct and Assumed
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....XXX.....
2. 2004.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....XXX.....
3. 2005.....	.....35.....	.....35.....	.....	.....	.....	.....	.....	.....	.....5.....	.....5.....	.....	.....0.....	.....XXX.....
4. 2006.....	.....15.....	.....15.....	.....	.....	.....	.....	.....	.....	.....5.....	.....5.....	.....	.....0.....	.....XXX.....
5. 2007.....	.....73.....	.....73.....	.....	.....	.....	.....	.....	.....	.....10.....	.....10.....	.....	.....0.....	.....XXX.....
6. 2008.....	.....222.....	.....222.....	.....89.....	.....89.....	.....	.....	.....20.....	.....20.....	.....10.....	.....10.....	.....	.....0.....	.....XXX.....
7. 2009.....	.....440.....	.....440.....	.....174.....	.....174.....	.....	.....	.....40.....	.....40.....	.....25.....	.....25.....	.....	.....0.....	.....XXX.....
8. 2010.....	.....326.....	.....326.....	.....126.....	.....126.....	.....	.....	.....30.....	.....30.....	.....25.....	.....25.....	.....	.....0.....	.....XXX.....
9. 2011.....	.....934.....	.....934.....	.....262.....	.....262.....	.....	.....	.....94.....	.....94.....	.....80.....	.....80.....	.....	.....0.....	.....XXX.....
10. 2012.....	.....1,753.....	.....1,753.....	.....549.....	.....549.....	.....	.....	.....166.....	.....166.....	.....250.....	.....250.....	.....	.....0.....	.....XXX.....
11. 2013.....	.....6,175.....	.....6,175.....	.....1,550.....	.....1,550.....	.....	.....	.....200.....	.....200.....	.....790.....	.....790.....	.....	.....0.....	.....XXX.....
12. Totals...	.....9,973.....	.....9,973.....	.....2,750.....	.....2,750.....	.....0.....	.....0.....	.....550.....	.....550.....	.....1,200.....	.....1,200.....	.....0.....	.....0.....	.....XXX.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....0.....	.....0.....
2. 2004.	.....16,730.....	.....15,862.....	.....868.....	.....52.7.....	.....52.9.....	.....48.0.....	.....	.....	.....0.01.....	.....0.....	.....0.....
3. 2005.	.....18,459.....	.....16,982.....	.....1,477.....	.....55.0.....	.....53.7.....	.....75.9.....	.....	.....	.....0.01.....	.....0.....	.....0.....
4. 2006.	.....17,874.....	.....16,855.....	.....1,019.....	.....51.3.....	.....51.3.....	.....52.2.....	.....	.....	.....0.01.....	.....0.....	.....0.....
5. 2007.	.....20,482.....	.....19,372.....	.....1,109.....	.....58.7.....	.....58.9.....	.....54.6.....	.....	.....	.....0.01.....	.....0.....	.....0.....
6. 2008.	.....22,479.....	.....21,056.....	.....1,423.....	.....67.0.....	.....67.1.....	.....65.6.....	.....	.....	.....0.01.....	.....0.....	.....0.....
7. 2009.	.....20,377.....	.....18,919.....	.....1,458.....	.....61.1.....	.....60.7.....	.....67.6.....	.....	.....	.....0.01.....	.....0.....	.....0.....
8. 2010.	.....19,155.....	.....17,692.....	.....1,463.....	.....56.5.....	.....55.6.....	.....70.1.....	.....	.....	.....0.01.....	.....0.....	.....0.....
9. 2011.	.....22,301.....	.....20,243.....	.....2,058.....	.....63.7.....	.....61.4.....	.....102.5.....	.....	.....	.....0.01.....	.....0.....	.....0.....
10. 2012.	.....18,785.....	.....17,496.....	.....1,289.....	.....54.4.....	.....52.4.....	.....116.9.....	.....	.....	.....0.01.....	.....0.....	.....0.....
11. 2013.	.....23,166.....	.....23,166.....	.....0.....	.....66.1.....	.....66.1.....	.....0.0.....	.....	.....	.....0.01.....	.....0.....	.....0.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	One Year	Two Year
1. Prior.....	.....398	.....259	.....270	.....256	.....247	.....255	.....240	.....243	.....240	.....240	.....0	.....(3)
2. 2004.....	.....1,098	.....773	.....765	.....772	.....774	.....768	.....760	.....759	.....758	.....758	.....0	.....(1)
3. 2005.....	.....XXX	.....1,471	.....1,375	.....1,368	.....1,376	.....1,361	.....1,348	.....1,363	.....1,354	.....1,354	.....(0)	.....(9)
4. 2006.....	.....XXX	.....XXX	.....925	.....912	.....925	.....920	.....907	.....912	.....907	.....907	.....0	.....(6)
5. 2007.....	.....XXX	.....XXX	.....XXX	.....1,039	.....1,029	.....1,026	.....988	.....1,019	.....985	.....987	.....2	.....(32)
6. 2008.....	.....XXX	.....XXX	.....XXX	.....XXX	.....1,270	.....1,282	.....1,201	.....1,283	.....1,264	.....1,264	.....1	.....(19)
7. 2009.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,318	.....1,041	.....1,315	.....1,304	.....1,304	.....0	.....(11)
8. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,744	.....1,315	.....1,308	.....1,308	.....(0)	.....(7)
9. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,841	.....1,857	.....1,857	.....0	.....16
10. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,118	.....1,116	.....(2)	.....XXX
11. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX
12. Totals.....											.....0	.....(70)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013		
1. Prior.....	.....000	.....28	.....119	.....(244)	.....208	.....230	.....231	.....240	.....240	.....240	.....XXX	.....XXX
2. 2004....	.....585	.....593	.....657	.....522	.....739	.....748	.....748	.....754	.....758	.....758	.....XXX	.....XXX
3. 2005.....	.....XXX	.....968	.....1,190	.....859	.....1,307	.....1,330	.....1,332	.....1,353	.....1,354	.....1,354	.....XXX	.....XXX
4. 2006.....	.....XXX	.....XXX	.....548	.....539	.....830	.....866	.....870	.....899	.....907	.....907	.....XXX	.....XXX
5. 2007....	.....XXX	.....XXX	.....XXX	.....507	.....863	.....916	.....924	.....980	.....987	.....987	.....XXX	.....XXX
6. 2008.....	.....XXX	.....XXX	.....XXX	.....XXX	.....730	.....1,066	.....1,073	.....1,206	.....1,264	.....1,264	.....XXX	.....XXX
7. 2009.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....793	.....800	.....1,175	.....1,304	.....1,304	.....XXX	.....XXX
8. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,244	.....1,080	.....1,308	.....1,308	.....XXX	.....XXX
9. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,275	.....1,857	.....1,857	.....XXX	.....XXX
10. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,116	.....1,116	.....XXX	.....XXX
11. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior.....	.....146	.....86	.....62	.....29	.....16	.....13	.....7	.....2		
2. 2004.....	.....208	.....74	.....42	.....29	.....15	.....9	.....6	.....3		
3. 2005.....	.....XXX	.....209	.....70	.....42	.....30	.....12	.....7	.....5		
4. 2006.....	.....XXX	.....XXX	.....134	.....62	.....40	.....18	.....11	.....6		
5. 2007.....	.....XXX	.....XXX	.....XXX	.....115	.....59	.....34	.....20	.....11	.....(2)	
6. 2008.....	.....XXX	.....XXX	.....XXX	.....XXX	.....168	.....80	.....52	.....27		
7. 2009.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....171	.....92	.....50		
8. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....196	.....106		
9. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....221		
10. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2	
11. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	

PATRONS OXFORD INSURANCE COMPANY
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		1	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9
			2	3						
States, Etc.		Active Status	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges not Included in Premiums	Direct Premiums Written for Federal Purchasing Groups (Incl. in Col. 2)
1.	Alabama.....AL	...N....								
2.	Alaska.....AK	...N....								
3.	Arizona.....AZ	...N....								
4.	Arkansas.....AR	...N....								
5.	California.....CA	...N....								
6.	Colorado.....CO	...N....								
7.	Connecticut.....CT	...N....								
8.	Delaware.....DE	...N....								
9.	District of Columbia.....DC	...N....								
10.	Florida.....FL	...N....								
11.	Georgia.....GA	...N....								
12.	Hawaii.....HI	...N....								
13.	Idaho.....ID	...N....								
14.	Illinois.....IL	...N....								
15.	Indiana.....IN	...N....								
16.	Iowa.....IA	...N....								
17.	Kansas.....KS	...N....								
18.	Kentucky.....KY	...N....								
19.	Louisiana.....LA	...N....								
20.	Maine.....ME	...L....	36,015,135	35,063,863		17,713,947	19,913,250	12,723,115	297,762	
21.	Maryland.....MD	...N....								
22.	Massachusetts.....MA	...N....								
23.	Michigan.....MI	...N....								
24.	Minnesota.....MN	...N....								
25.	Mississippi.....MS	...N....								
26.	Missouri.....MO	...N....								
27.	Montana.....MT	...N....								
28.	Nebraska.....NE	...N....								
29.	Nevada.....NV	...N....								
30.	New Hampshire.....NH	...N....								
31.	New Jersey.....NJ	...N....								
32.	New Mexico.....NM	...N....								
33.	New York.....NY	...N....								
34.	North Carolina.....NC	...N....								
35.	North Dakota.....ND	...N....								
36.	Ohio.....OH	...N....								
37.	Oklahoma.....OK	...N....								
38.	Oregon.....OR	...N....								
39.	Pennsylvania.....PA	...N....								
40.	Rhode Island.....RI	...N....								
41.	South Carolina.....SC	...N....								
42.	South Dakota.....SD	...N....								
43.	Tennessee.....TN	...N....								
44.	Texas.....TX	...N....								
45.	Utah.....UT	...N....								
46.	Vermont.....VT	...N....								
47.	Virginia.....VA	...N....								
48.	Washington.....WA	...N....								
49.	West Virginia.....WV	...N....								
50.	Wisconsin.....WI	...N....								
51.	Wyoming.....WY	...N....								
52.	American Samoa.....AS	...N....								
53.	Guam.....GU	...N....								
54.	Puerto Rico.....PR	...N....								
55.	US Virgin Islands.....VI	...N....								
56.	Northern Mariana Islands...MP	...N....								
57.	Canada.....CAN	...N....								
58.	Aggregate Other Alien.....OT	...XXX..	0	0	0	0	0	0	0	0
59.	Totals.....	(a)....1	36,015,135	35,063,863	0	17,713,947	19,913,250	12,723,115	297,762	0

DETAILS OF WRITE-INS

58001. ....	...XXX..								
58002. ....	...XXX..								
58003. ....	...XXX..								
58998. Summary of remaining write-ins for Line 58 from overflow page	...XXX..	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above)	...XXX..	0	0	0	0	0	0	0	0

(a) Insert the number of "L" responses except for Canada and Other Alien.

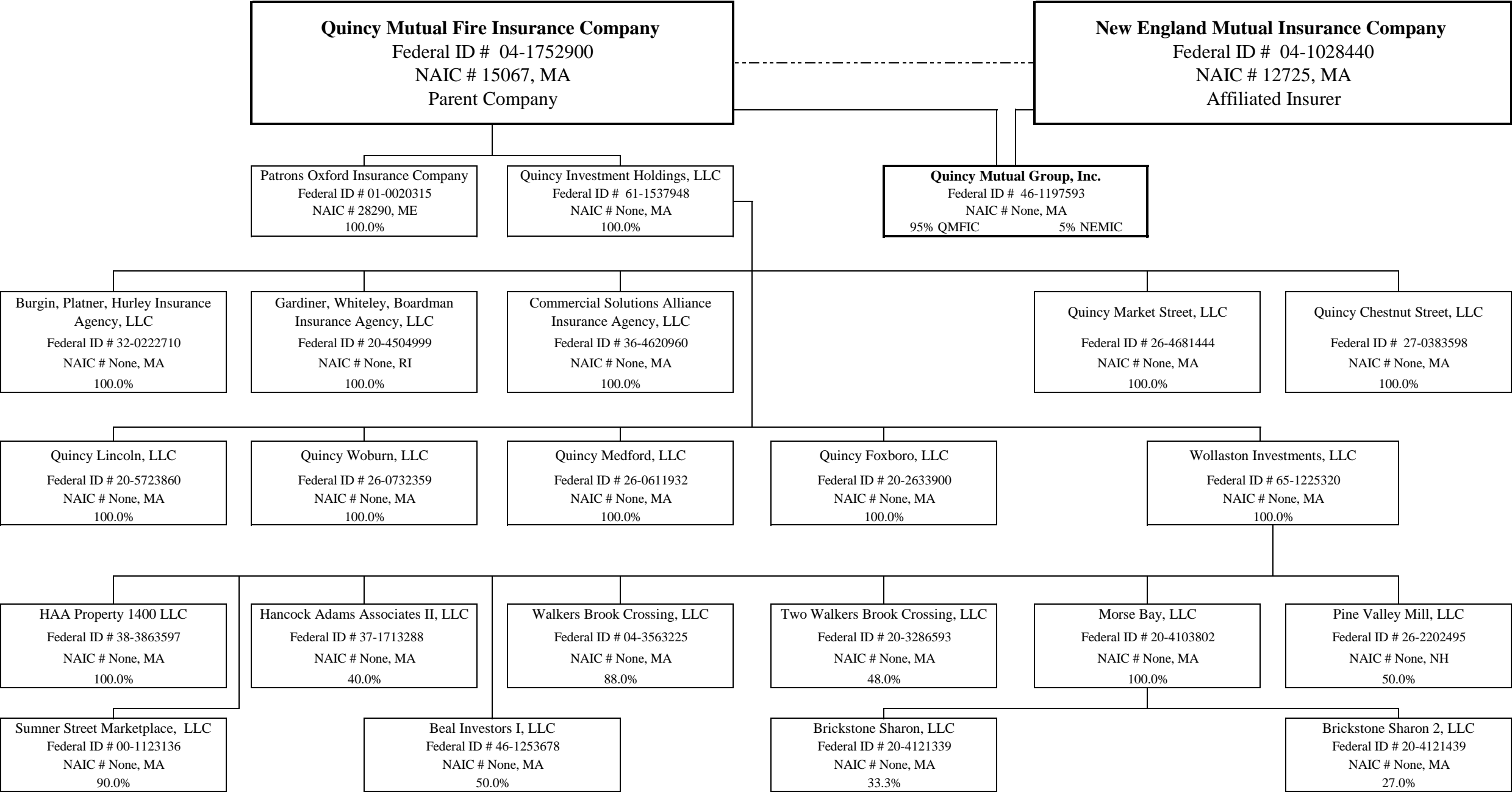
(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;

(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

Explanation of Basis of Allocation of Premiums by States, etc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

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